

**UNIFORM HAZARDOUS
WASTE MANIFEST**

3. Generator's Name and Mailing Address

CENTRAL PLANTS

1300 ARCTIC CIRCLE., SANTA FE SPRINGS, CA

4. Generator's Phone (213) 921-2251

5. Transporter 1 Company Name

OMEGA RECOVERY SERVICES

6. US EPA ID Number

IC1A1D1014121214510101

7. Transporter 2 Company Name

8. US EPA ID Number

10. US EPA ID Number

9. Designated Facility Name and Site Address

OMEGA RECOVERY SERVICES

12504 E. WHITTIER BLVD

WHITTIER, CA 90602

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of 1

Information in the shaded areas
is not required by Federal law.

A. State Manifest Document Number

8 8293528

B. State Generator's ID

H1A1031-0063169

C. State Transporter's ID

904878

D. Transporter's Phone (213) 698-0991

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

IC1A1D1014121214510101

H. Facility's Phone

(213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. HAZARDOUS WASTE LIQUID N.O.S UN 9189
(R-12)

12. Containers

No. Type

13. Total
Quantity

Unit
Wt/Vol

14. Waste No.

State

01013 CY 01751010 P

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a.

01

b.

c.

d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me that I can afford.

Printed/Typed Name

NORMAN E JENSEN

Signature

Norman E Jensen

Month Day Year

10/21/1989

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

JAVIER HERNANDEZ

Signature

Javier Hernandez

Month Day Year

10/21/1989

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

10/21/1989

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

FRANK FORD

Signature

Frank Ford

Month Day Year

10/21/1989

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To: P.O. Box 3000, Sacramento, CA 95812

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550